

MORRISON | FOERSTER

12531 HIGH BLUFF DRIVE
 SUITE 100
 SAN DIEGO, CALIFORNIA
 92130-2040
 TELEPHONE: 858.720.5100
 FACSIMILE: 858.720.5125
 WWW.MOFO.COM

MORRISON & FOERSTER LLP
 NEW YORK, SAN FRANCISCO,
 LOS ANGELES, PALO ALTO,
 SAN DIEGO, WASHINGTON, D.C.
 DRIVR, NORTHERN VIRGINIA,
 ORANGE COUNTY, SACRAMENTO,
 WALNUT CREEK, CENTURY CITY
 TOKYO, LONDON, BEIJING,
 SHANGHAI, HONG KONG,
 SINGAPORE, BRUSSELS

RECEIVED
CENTRAL FAX CENTER

DEC 20 2005

TO:	FACSIMILE:	TELEPHONE:
U.S. Patent and Trademark Office MS AF	(571) 273-8300	

FROM: James J. Mullen III, Ph.D. – Reg. No. 44,957 **DATE:** December 20, 2005

Number of pages with cover page: <u>6</u>	Originals or hard copy will <u>not</u> follow.
---	--

Preparer of this slip has confirmed that facsimile number given is correct: 10598/gly1

If you do not receive all pages, please call (858) 720-7972 as soon as possible.

CAUTION - CONFIDENTIAL

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (858) 720-7972 and send the original transmission to us by return mail at the address below.

This facsimile contains confidential information which may also be privileged. Unless you are the addressee (or authorized to receive for the addressee), you may not copy, use, or distribute it. If you have received it in error, please advise Morrison & Foerster LLP immediately by telephone or facsimile and return it promptly by mail.

Comments:

ATTORNEY DOCKET: 511582002800
 GROUP ART UNIT: 1643
 EXAMINER: D. Blanchard
 SERIAL NO.: 09/942,052
 FILING DATE: August 28, 2001
 INVENTOR(S): Arthur B. RAITANO et al.
 TITLE: NUCLEIC ACID AND CORRESPONDING PROTEIN
 ENTITLED 85P1B3 USEFUL IN TREATMENT AND
 DETECTION OF CANCER

Papers attached:

1. Transmittal (1 page)
2. Fee Transmittal (1 page + duplicate for fee processing)
3. Petition for Extension of Time (1 page)
4. Notice of Appeal (1 page)

**IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL
 GRACE YU AT (858) 720-7972 AS SOON AS POSSIBLE.**

PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/942,052
		Filing Date	August 28, 2001
		First Named Inventor	Arthur B. RAITANO
		Art Unit	1643
		Examiner Name	D. Blanchard
Total Number of Pages in This Submission	6	Attorney Docket Number	511582002800

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (1 page + duplicate for fee processing)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) (1 page)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request (1 page)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile coversheet (1 page)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Customer No. 36327	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	James J. Mullen III, Ph.D.		
Date	December 20, 2005	Reg. No.	44,957

I hereby certify that this correspondence is being facsimile transmitted to MS AF of the Patent and Trademark Office, facsimile no. (571) 273-6300, on the date shown below.

Dated: December 20, 2005

Signature: 

(Grace Yu)

sd-294484

PTO/SB/17 (12-04v2)
 Approved for use through 7/31/2006. DMB 0851-0032
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL For FY 2005		Complete if Known	
<i>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2003 (H.R. 4818).</i>		Application Number	09/942,052
		Filing Date	August 28, 2001
		First Named Inventor	Arthur B. RAITANO
		Examiner Name	D. Blanchard
		Art Unit	1643
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No. 511582002800	
TOTAL AMOUNT OF PAYMENT (\$) 760.00			

RECEIVED
CENTRAL FAX CENTER

DEC 20 2005

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEES CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00
2. EXCESS CLAIM FEES							
<u>Fee Description</u>							
Each claim over 20 (including Reissues) <u>Small Entity Fee (\$)</u> 50 <u>Fee (\$)</u> 25							
Each independent claim over 3 (including Reissues) <u>Small Entity Fee (\$)</u> 200 <u>Fee (\$)</u> 100							
Multiple dependent claims <u>Small Entity Fee (\$)</u> 360 <u>Fee (\$)</u> 180							
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
72	- 82 =	x	= 0.00	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	0.00	
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
4	- 7 =	x	= 0.00				
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
- 100 =	/50	(round up to a whole number) x	= 0.00				
4. OTHER FEE(S)							
Non-English Specification: \$130 fee (no small entity discount) <u>Fee (\$)</u> 0.00							
Other (e.g., late filing surcharge): 2401 Notice of appeal <u>Fee (\$)</u> 250.00							
2253 Extension for response within third month <u>Fee (\$)</u> 510.00							

SUBMITTED BY						
<u>Signature</u>	<u>James J. Mullen III, Ph.D.</u>		<u>Registration No.</u>	44,957	<u>Telephone</u>	(858) 720-7940
Name (Print/Type)			Date	December 20, 2005		

sd-294481